

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

1 Date of Request: <u>2/23/05</u>		2 Serial/Patent # <u>10(00)690</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input type="checkbox"/>	Filing		\$
<input type="checkbox"/>	Amendment		\$
<input type="checkbox"/>	Extension of Time		\$
<input type="checkbox"/>	Notice of Appeal/Appeal		\$
<input checked="" type="checkbox"/>	Petition	<u>12/23/03</u>	\$ 130.00
<input type="checkbox"/>	Issue		\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$
<input type="checkbox"/>	Maintenance		\$
<input type="checkbox"/>	Assignment		\$
<input checked="" type="checkbox"/>	Other	<u>2/11/05</u>	\$ 130.00
		7 TOTAL AMOUNT OF REFUND	\$ <u>260.00</u>
8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check	
<input type="checkbox"/>	Overpayment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:
<input type="checkbox"/>	Duplicate Payment	<input checked="" type="checkbox"/>	<u>9--2814</u>
<input checked="" type="checkbox"/>	No Fee Due (Explanation):		
<u>POST CARD RECEIPT</u>			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Patricia Faison-Ball</u>		TITLE: <u>Attorney</u>	
SIGNATURE: <u>Patricia Faison-Ball</u>		PHONE: <u>23212</u>	
OFFICE: <u>Referrals</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****			
APPROVED: <u>Clark Bell</u>		DATE: <u>2/23/05</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B